



## SPECIAL EVENT - PUBLIC PROPERTY USER APPLICATION & AGREEMENT

### DIRECTIONS

#### Step One:

- If this request involves closing a street  
Contact Lafayette Police – Special Operations Division / 765-807-1272

- If this request involves renting the Big Four Depot - Community Room  
Contact Facilities Department for availability / 765-807-1323

#### Step Two:

- Complete and submit this application to Lafayette Clerk's Office  
City Hall, 2<sup>nd</sup> floor, 20 N 6<sup>th</sup> Street, Lafayette, IN / 765-807-1021



Do not use for  
contractor  
vehicle permit

### User Information *Sunday*

Date of Function: Sept. 20, 2020 Time: From: Noon am/pm to: 3:30 am/pm

Name: Josh Prokopy Organization: Hunger Hike

Street Address: 420 N. 4th St.

City: Lafayette State: IN Zip Code: 47901

Contact person(s): Josh Phone Number(s): 765-423-2691

Email: jprokopy@lumserve.org

Event Description: Kick-off event and 3K Walk

Caterer: N/A Caterer's Phone Number: \_\_\_\_\_

### This event will utilize the following venues (check all that apply):

- ☐ Big 4 Depot - Community Room ☒ Riehle Plaza ☒ John T. Myers Bridge  
☐ City Right-of-way ☐ City Street ☐ Sidewalk ☐ Other \_\_\_\_\_

### This event will include the following elements (check all that apply):

Anticipated Attendance: 800

- ☐ Street/Sidewalk/Right-of-way restriction or closure ☒ Food or Beverages  
☒ Restroom Facilities (required for events 4+ hours) ☒ Tents/Canopies  
☐ Alcohol (security is required) ☐ Security (required when serving alcohol)

Not sure if you need an A&E Permit? Go to:

☐ Amusement & Entertainment Permit # \_\_\_\_\_ <http://www.in.gov/dhs/2795.htm>

☐ Stage ☐ Fireworks ☐ Outdoor cooker/grill ☐ Other \_\_\_\_\_

**Optional Equipment & Services:**

☐ Traffic Control: barricades, **No Parking** signs, \$25

**Timetable** (Minimum # of days. Advanced planning is encouraged; sequence remains the same)

	0	7 days	14 days	21 days			42 days
	Pre-planning		Notices	Event Preparation			Event
Begin	1st week	2nd week	3rd week	4th week	5th week	6th week	
	First contact	Submit Application Pre-event Meeting	Contact Neighbors prior to Board of Works Hearing	Board of Works Public Hearing & Approval			Date of Event

**Application submittal checklist**

- ☒ Application
- ☐ Pre-event meeting (if required)
- ☐ Good Neighbor letter to neighboring properties (send out prior to Board of Works hearing)
- ☒ Letter of request to Board of Works (omit if only using Big Four Depot community room)
- ☒ Receipt – payment made to City of Lafayette
  - Damage Deposit: \$ \_\_\_\_\_ (required only when renting Depot)
  - Permit Fee: \$ 25 (fee waived when renting Depot)
  - Rental Fee: \$ \_\_\_\_\_
  - Equipment & Services: \$ \_\_\_\_\_ (optional)
- ☒ Certificate of Insurance
- ☐ Amusement & Entertainment Permit # \_\_\_\_\_  
Not sure if you need an A&E Permit? Want more information? Go to:  
<http://www.in.gov/dhs/2795.htm> and see definition of A&E Permit in **Rule and Regulations** instructions found at the same link as the **Special Event Application**
- ☐ Traffic Control / Public Safety / Emergency Plan
- ☒ User Agreement
- ☒ Board of Public Works and Safety meeting (if required)

**USER AGREEMENT:**

INDEMNIFICATION AND RELEASE. In consideration of being permitted the use of the venue(s) indicated above on this document (the "Property"), which Property is owned by the City of Lafayette, User as indicated below, for User and User's legal representatives, successors, and assigns, hereby releases waives and discharges the City of Lafayette, its officers, departments and employees and of them (herein collectively, "City") from all liability to User and User's officers, members, legal representatives, successors, invitees and assigns (herein collectively "User") from any and all loss or damage, and any claim of damages resulting therefore, on account of injury to persons or property arising out of possession or use of the Property, whether caused by the negligence of City, or any of them, or otherwise, resulting during the time the User is entitled to occupy and use the Property. User shall exercise the privileges under this Agreement at User's own risk, and irrespective of any negligence of City, User shall indemnify and hold City harmless from any and all liability for all damages, costs, losses and expenses resulting from, arising out of, or in any way connected with User's use and possession of the Property, including attorney fees incurred by City in defending any action arising out of User's possession or use of the Property, whether caused by negligence of the City, or any of them, or otherwise. City shall not be liable to User for any reason whatever User's occupation or use of the Property shall be hindered or disturbed. User agrees that User has made inspection of the Property and is not relying upon any representations of City or any of them as to the condition of state of repair of the Property or to its suitability for any particular purpose. This release, waiver, and indemnification is intended to be as broad and inclusive as permitted by the laws of the State of Indiana, and if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect.

I have read the above Indemnification and Release and the Policy and Rules governing the use of any public property, city street, sidewalk or public property within the city's right-of-way, the James F. Riehle Plaza, Big Four Community Room, and John T. Myers Main Street Pedestrian Bridge. I agree on my own behalf, and on behalf of the group or organization I am authorized to represent, to such Indemnification and Release and to follow such Rules and Regulations which are incorporated and made a part of this user agreement.

"Lafayette Board of Works"

By: \_\_\_\_\_

"User"

By: Jon Hiron  
Signature

Printed: Jon Hiron, Executive Director

Date: 1/17/2020

## Hunger Hike



### Hunger Hike

420 N 4<sup>th</sup> Street  
Lafayette, IN 47901  
(765) 423-2691  
hungerhike@lumserve.org

### Sponsoring Organizations:

**Lafayette Urban Ministry**  
420 N 4<sup>th</sup> Street  
Lafayette, IN 47901  
(765) 423-2691  
www.lumserve.org

### Food Finders Food Bank

1204 Greenbush Street  
Lafayette, IN 47904  
(765) 471-0062  
www.food-finders.org

### St. Thomas Aquinas Center

535 W State Street  
West Lafayette, IN 47906  
(765) 743-4652  
www.sttoms-purdue.org

January 16, 2020

Mindy Miller  
Board of Public Works & Safety  
City of Lafayette  
20 N 6<sup>th</sup> Street  
Lafayette, IN 47901-1408

Dear Ms. Miller,

On behalf of the sponsoring organizations, I would like to request the use of Riehle Plaza for Hunger Hike 2020. Here are the details:

- Hunger Hike 3K Walk
  - Sunday, September 20, 2020
  - Noon to 3:30 p.m.
  - Riehle Plaza, restrooms, John T. Myers Bridge

Please put this on the meeting agenda of the Board of Works and Safety for their review and approval

Please let me know if you need additional information. Thank you.

Sincerely,



Josh Prokopy  
Director  
Hunger Hike 2020

cc: Joe Micon, Executive Director, Lafayette Urban Ministry

### ENCLOSURES:

Certificate of Insurance  
Special Event Application  
Hunger Hike Route Map  
Hunger Hike Site Map



# Hunger Hike

Heritage Trail

Lafayette Station

Lectern

DJ Tent

Tent

Tent

Tent

Tent

Richie Plaza

John T. Myers Pedestrian Bridge

N 2nd St

N 2nd St

N 2nd St







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/21/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Underwood Agency 3990 State Road 38 E STE 5A Lafayette IN 47905	CONTACT NAME: Aspen Klaus PHONE (A/C, No, Ext): (765) 742-7320 FAX (A/C, No): E-MAIL ADDRESS: aklaus@underwoodagency.com
INSURED Lafayette Urban Ministry, Inc 420 N 4th St Lafayette IN 47901-1112	INSURER(S) AFFORDING COVERAGE INSURER A: West Bend Mutual Ins NAIC # 15350 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

## COVERAGES

CERTIFICATE NUMBER: 2020-2021

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			A567172	02/27/2020	02/27/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			A567172	02/27/2020	02/27/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Underinsured motorist \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$ OCCUR CLAIMS-MADE			A567172	02/27/2020	02/27/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	A567195	02/27/2020	02/27/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Hunger Hike 2019 3K Walk & Kick Off Event  
9/22/2019  
Riehle Plaza

## CERTIFICATE HOLDER

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

MISCELLANEOUS PAYMENT RECPT#: 1996286  
City of Lafayette, IN  
20 N 6th St  
Lafayette IN 47901

DATE: 01/27/20 TIME: 10:42  
CLERK: sscott DEPT:  
CUSTOMER#: 999  
MISC CUSTOMER  
COMMENT: EVENT REQUEST

CHARGES:  
APG1 HUNGER HIKE 25.00  
AMOUNT PAID: 25.00

PAID BY: LUM  
PAYMENT METH: CHECK  
104686

REFERENCE:

AMT TENDERED: 25.00  
AMT APPLIED: 25.00  
CHANGE: .00